

APV-PB60564

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PCT REQUEST

Original (for SUBMISSION)

0	For receiving Office use only	
0-1	International Application No.	
0-2	International Filing Date	
0-3	Name of receiving Office and "PCT International Application"	
0-4	Form PCT/RO/101 PCT Request	
0-4-1	Prepared Using	PCT-SAFE [EASY mode] Version 3.50 (Build 0002.162)
0-5	Petition The undersigned requests that the present international application be processed according to the Patent Cooperation Treaty	
0-6	Receiving Office (specified by the applicant)	European Patent Office (EPO) (RO/EP)
0-7	Applicant's or agent's file reference	APV-PB60564
I	Title of invention	CHEMICAL COMPOUNDS
II	Applicant	
II-1	This person is	applicant only
II-2	Applicant for	all designated States except US
II-4	Name	GLAXO GROUP LIMITED
II-5	Address	Glaxo Wellcome House Berkeley Avenue Greenford Middlesex UB6 0NN United Kingdom
II-6	State of nationality	GB
II-7	State of residence	GB
II-8	Telephone No.	020 8047 5000
II-9	Facsimile No.	020 8047 6894

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III-1	Applicant and/or Inventor	
III-1-1	This person is	applicant and inventor
III-1-2	Applicant for	US only
III-1-4	Name (LAST, First)	ALVARO, Giuseppe
III-1-5	Address	GlaxoSmithKline Via Alessandro Fleming 2 I-37100 Verona Italy
III-1-6	State of nationality	IT
III-1-7	State of residence	IT
III-2	Applicant and/or Inventor	
III-2-1	This person is	applicant and inventor
III-2-2	Applicant for	US only
III-2-4	Name (LAST, First)	DI FABIO, Romano
III-2-5	Address	GlaxoSmithKline Via Alessandro Fleming 2 I-37100 Verona Italy
III-2-6	State of nationality	IT
III-2-7	State of residence	IT
III-3	Applicant and/or Inventor	
III-3-1	This person is	applicant and inventor
III-3-2	Applicant for	US only
III-3-4	Name (LAST, First)	GIOVANNINI, Riccardo
III-3-5	Address	GlaxoSmithKline Via Alessandro Fleming 2 I-37100 Verona Italy
III-3-6	State of nationality	IT
III-3-7	State of residence	IT
III-4	Applicant and/or inventor	
III-4-1	This person is	applicant and inventor
III-4-2	Applicant for	US only
III-4-4	Name (LAST, First)	PAIO, Alfredo
III-4-5	Address	GlaxoSmithKline Via Alessandro Fleming 2 I-37100 Verona Italy
III-4-6	State of nationality	IT
III-4-7	State of residence	IT

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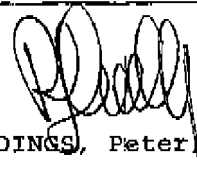
III-5	Applicant and/or inventor	
III-5-1	This person is	applicant and inventor
III-5-2	Applicant for	US only
III-5-4	Name (LAST, First)	TRANQUILLINI, Maria, Elvira
III-5-5	Address	GlaxoSmithKline Via Alessandro Fleming 2 I-37100 Verona Italy
III-5-6	State of nationality	IT
III-5-7	State of residence	IT
III-6	Applicant and/or inventor	
III-6-1	This person is	applicant and inventor
III-6-2	Applicant for	US only
III-6-4	Name (LAST, First)	MATTIOLI, Lucia
III-6-5	Address	GlaxoSmithKline Via Alessandro Fleming 2 I-37100 Verona Italy
III-6-6	State of nationality	IT
III-6-7	State of residence	IT
IV-1	Agent or common representative; or address for correspondence The person identified below is hereby/ has been appointed to act on behalf of the applicant(s) before the competent International Authorities as:	agent
IV-1-1	Name (LAST, First)	GIDDINGS, Pater, John
IV-1-2	Address	GlaxoSmithKline 980 Great West Road (CN925.1) Brentford Middlesex TW8 9GS United Kingdom
IV-1-3	Telephone No.	020 8047 4414
IV-1-4	Facsimile No.	020 8047 6894
V	DESIGNATIONS	
V-1	The filing of this request constitutes under Rule 4.9(a), the designation of all Contracting States bound by the PCT on the international filing date, for the grant of every kind of protection available and, where applicable, for the grant of both regional and national patents.	

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VI-1	Priority claim of earlier national application		
VI-1-1	Filing date	12 November 2003 (12.11.2003)	
VI-1-2	Number	0326407.4	
VI-1-3	Country	GB	
VII-1	International Searching Authority Chosen	European Patent Office (EPO) (ISA/EP)	
VIII	Declarations	Number of declarations	
VIII-1	Declaration as to the identity of the inventor	-	
VIII-2	Declaration as to the applicant's entitlement, as at the international filing date, to apply for and be granted a patent	-	
VIII-3	Declaration as to the applicant's entitlement, as at the international filing date, to claim the priority of the earlier application	-	
VIII-4	Declaration of inventorship (only for the purposes of the designation of the United States of America)	-	
VIII-5	Declaration as to non-prejudicial disclosures or exceptions to lack of novelty	-	
IX	Check list	number of sheets	electronic file(s) attached
IX-1	Request (including declaration sheets)	5	✓
IX-2	Description	96	-
IX-3	Claims	7	-
IX-4	Abstract	1	✓
IX-5	Drawings	0	-
IX-7	TOTAL	109	
	Accompanying items	paper document(s) attached	electronic file(s) attached
IX-8	Fee calculation sheet	✓	-
IX-13	Priority document(s)	Item(s) VI-1	-
IX-17	PCT-SAFE physical media	-	✓
IX-19	Figure of the drawings which should accompany the abstract		
IX-20	Language of filing of the international application	English	
X-1	Signature of applicant, agent or common representative		
X-1-1	Name (LAST, First)	GIDDINGS, Peter John	
X-1-2	Name of signatory		
X-1-3	Capacity		

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PCT REQUESTOriginal (for **SUBMISSION**)**FOR RECEIVING OFFICE USE ONLY**

10-1	Date of actual receipt of the purported international application	
10-2	Drawings:	
10-2-1	Received	
10-2-2	Not received	
10-3	Corrected date of actual receipt due to later but timely received papers or drawings completing the purported international application	
10-4	Date of timely receipt of the required corrections under PCT Article 11(2)	
10-5	International Searching Authority	ISA/EP
10-6	Transmittal of search copy delayed until search fee is paid	

FOR INTERNATIONAL BUREAU USE ONLY

11-1	Date of receipt of the record copy by the International Bureau	
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PCT REQUEST (ANNEX - FEE CALCULATION SHEET)

Original (for SUBMISSION)

(This sheet is not part of and does not count as a sheet of the international application)

0	For receiving Office use only		
0-1	International Application No.		
0-2	Date stamp of the receiving Office		
0-4	Form PCT/RO/101 (Annex) PCT Fee Calculation Sheet		
0-4-1	Prepared Using	PCT-SAFE [EASY mode] Version 3.50 (Build 0002.162)	
0-9	Applicant's or agent's file reference		APV-PB60564
2	Applicant		GLAXO GROUP LIMITED
12	Calculation of prescribed fees		
		fee amount/multiplier	Total amounts (EUR)
12-1	Transmittal fee T	10	100
12-2-1	Search fee S	10	1550
12-2-2	International search to be carried out by	EP	
12-3	International filing fee (first 30 sheets) I1	902	
12-4	Remaining sheets	79	
12-5	Additional amount (X) I2	10	
12-6	Total additional amount	790	
12-7	I1 + I2 = I	1692	
12-12	EASY Filing reduction R	-64	
12-13	Total international filing fee (I+R) I	1628	
12-14	Fee for priority document		
	Number of priority documents requested	0	
12-15	Fee per document (X) P	30	
12-16	Total priority document fee: P	0	
12-17	TOTAL FEES PAYABLE (T+S+I+P)		3278
12-19	Mode of payment		authorization to charge deposit account
12-20	Deposit account instructions		
	The receiving Office	European Patent Office (EPO) (RO/EP)	
12-20-1	Authorization to charge the total fees indicated above		✓
12-20-2	Authorization to charge any deficiency or credit any overpayment in the total fees indicated above		✓
12-21	Deposit account No.		28050015
12-22	Date		03 November 2004 (03.11.2004)
12-23	Name and signature		GIDDINGS, Peter John

REMARKS

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PCT REQUEST (ANNEX - FEE CALCULATION SHEET)

Original (for SUBMISSION)

(This sheet is not part of and does not count as a sheet of the international application)

13-1-1	Applicant Remarks	Description, claims and abstract may contain Greek characters. Formula has not been provided in the abstract text but does appear in the hard copy.
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Original (for SUBMISSION)

13-1-1	Applicant Remarks	Description, claims and abstract may contain Greek characters. Formula has not been provided in the abstract text but does appear in the hard copy.
13-2-7	Validation messages Contents	Yellow! The power of attorney or a copy of the general power of attorney will need to be furnished unless all applicants sign the request form.
	Validation messages Contents	Yellow The abstract shall be as concise as the disclosure permits (preferably 50 to 150 words if it is in English or when translated into English).
	Validation messages Contents	Green? The international application contains no drawings. Please verify.
13-2-8	Validation messages Fees	Green? Please confirm that fee schedule utilized is the latest available.
13-2-8	Validation messages Payment	Green? Please ensure that you have a valid deposit account with the receiving Office selected.
13-2-10	Validation messages Annotate	Green? All indications that can be made on the Request form are specifically provided for by the software. Please confirm validity of additional indication.